STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

RECEIVED

APR 1 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15) PLEASE PRINT

Kelley Gossett

I. Name of Lobbyist(s)_	Kelley Gossett			DEPARTMENT OF S
II. Name of lobbyist's p	artnership, firm or	corporation, if an	y:	
Uber Technolog	gies, Inc.			
(Name o	of partnership, firm or	corporation)		
239 Causeway Stre	et, 2nd Floor	Boston	MA	02114
Business Address: (Street		(Town/City)	(State)	(Zip Code)
(603) _918-7096	()	e-mail kelleyg@	Duber.com
(Telephone)		(Fax)		
III. This statement cove reportable expense tran	•			ay file a separate report for
X All reportable transac	tions occurring in th	e months prior to the	ne reporting date relative to the	he following client:
Uber Techno	ologies, Inc.			
	Full Name of Client as	it appears on the Lob	byist Registration Form)	
OR ☐ All reportable transact unrelated to any particular		(including the lobb	yist's family), or the lobbyin	g firm listed below which are
IV. Date of Report April 25, 2018 🗓			July 25, 2018	
Reports cover: activity	from date of registrati	on to 3/31/18	activity from 4/1/18 to 6/30/18	8
	October 31, 2018 [ivity from 7/1/18 to 9/		January 30, 2019 activity from 10/1/18 to 12/31	1/18
			transactions made since to Secretary of State's Office, I	
VI. Check if additional	renorts are attache	d:		
	_		e Addendum A – Fees and E	expenses
	onorarium or reimbi	· •	must file Addendum B-Re	-
☐ If you, your firm, or	your family has mad	e political contribu	tions, you must file Addendi	um C-Political Contributions
Sworn Statement/Affirm	nation by Lobbyist			
I have read ASA 15, RSA and complete to the best (Signature of lobbyist) Kelley Gossett (Print Name of lobbyist)	of my knowledge an	nd RSA 664 and he	reby swear or affirm that the	foregoing information is true tte)
• /	\ \			